STDs in Persons Entering Corrections Facilities

Public Health Impact

Multiple studies and surveillance projects have demonstrated a high prevalence of STDs in persons entering jails and juvenile detention facilities.[1,2,3,4] Screening for chlamydia, gonorrhea, and syphilis at intake offers an opportunity to identify infections, prevent complications, and reduce transmission in the community. In cities where routine syphilis screening in jails occurs, a substantial percentage of all reported cases is identified in jails.[4] Collecting positivity data and analyzing trends in STD prevalence in this population can provide one method for monitoring trends in STD prevalence in the community.[4]

Observations

- In 2001, 10 states reported chlamydia, gonorrhea, or syphilis data to CDC as part of the Jail STD Prevalence Monitoring Project. Five states reported syphilis data as part of the Syphilis Elimination Initiative. Four states reported chlamydia and gonorrhea data as part of the Adolescent Women Reproductive Health Monitoring Project. Twenty-two states reported chlamydia and gonorrhea data (at least 100 test results) from corrections facilities as part of the Regional Infertility Prevention Program, and three additional states reported data in response to CDC's request for data.
- The maps shown in this section represent approximately 250,000 syphilis tests among men and 35,000 among women; 62,000 chlamydia tests among men and 31,000 among women; and 30,000 gonorrhea tests among men and 22,000 among women.
- The median percentage of reactive syphilis tests by facility was 8.7% (range 2.1% to 22.2%) for women entering 16 adult corrections facilities and 0.8% (range 0.4% to 1.6%) for adolescent women entering four juvenile detention centers (Figure EE); it was 2.7% (range 0.3% to 10.7%) among men at 18 adult corrections facilities and 0.1% (range 0.0% to 0.3%) among men at three juvenile facilities (Figure FF). The percentage of reactive syphilis tests representing cases of syphilis varied from site to site.
- Chlamydia positivity was higher in adolescent women screened in juvenile facilities than in adult facilities. Among adolescent women entering juvenile detention facilities, the median facility positivity for chlamydia was 14.8% (range 4.0% to 25.8%); positivity was greater than 10% in 19 of 24 facilities (79%) reporting data (Figure GG). Among adult women entering 22 corrections facilities, the median positivity for chlamydia was 4.5% (range 0.5% to 11.0%).
- The median chlamydia positivity among adolescent men entering 33 juvenile facilities was 5.3% (range 1.6% to 11.5%) (Figure HH). Among adult men

entering 13 corrections facilities, the median positivity was 6.8% (range 1.5% to 12.0%).

- The median positivity for gonorrhea among women entering 20 juvenile facilities was 5.6% (range 0.0% to 13.6%); positivity was greater than 4% in 13 of 20 juvenile facilities (65%) (Figure II). Among adult women entering 14 corrections facilities, the median positivity for gonorrhea was 2.5% (range 0.5% to 5.8%).
- The median positivity for gonorrhea among adolescent men entering 20 juvenile facilities was 1.2% (range 0.5% to 4.6%) (Figure JJ). Among adult men entering nine facilities, the median positivity was 2.2% (range 0.5% to 12.6%).

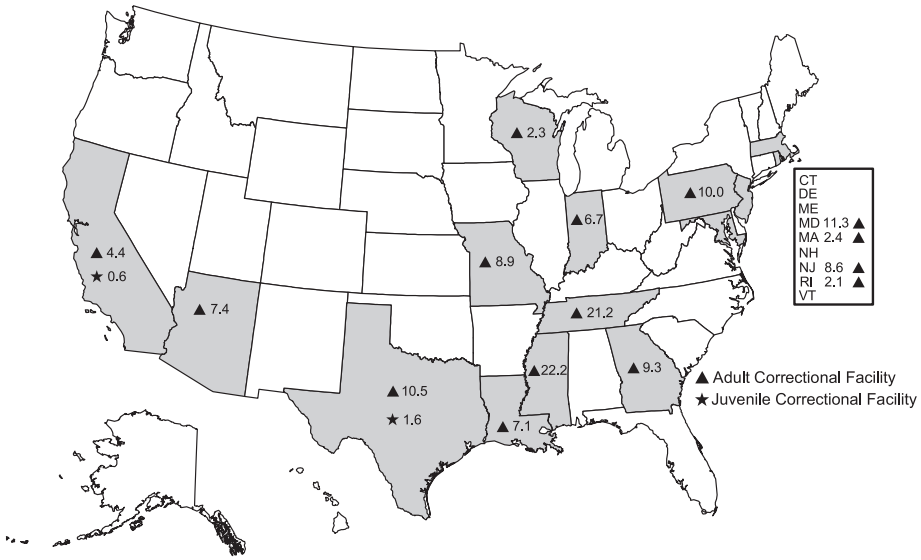
[1] Heimberger TS. Chang HG. Birkhead GS. DiFerdinando GD. Greenberg AJ. Gunn R. Morse DL. High prevalence of syphilis detected through a jail screening program. A potential public health measure to address the syphilis epidemic. *Arch Intern Med* 1993;153:1799-1804.

[2] CDC. Syphilis screening among women arrestees at the Cook County Jail – Chicago, 1996. *MMWR* 1998;47:432-3.

[3] Mertz KJ, Schwebke JR, Gaydos CA, Beideinger HA, Tulloch SD, Levine WC. Screening women in jails for chlamydial and gonococcal infection using urine tests: Feasibility, acceptability, prevalence and treatment rates. *Sex Transm Dis* 2002;29:271-276.

[4] Kahn RH, Scholl DT, Shane SM, Lemoine AL, Farley TA. Screening for syphilis in arrestees: Usefulness for community-wide syphilis surveillance and control. *Sex Transm Dis* 2002;29:150-156.

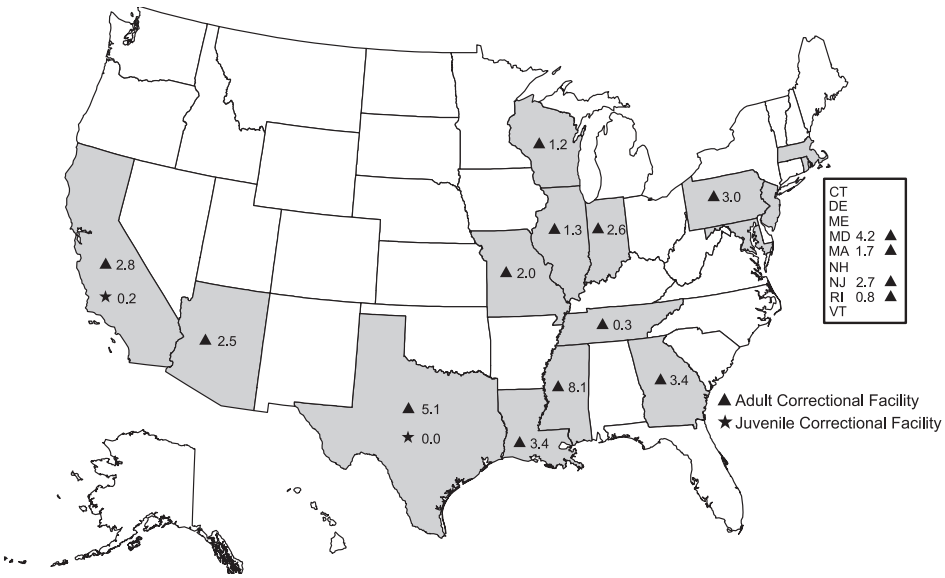
Figure EE. Syphilis serologic tests — Percent seroreactivity in women entering juvenile and adult corrections facilities, 2001



Note: The median positivity is presented from facilities reporting >100 test results. Texas submitted data from more than one adult corrections facility. California submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Local and State STD Control Programs; Centers for Disease Control and Prevention

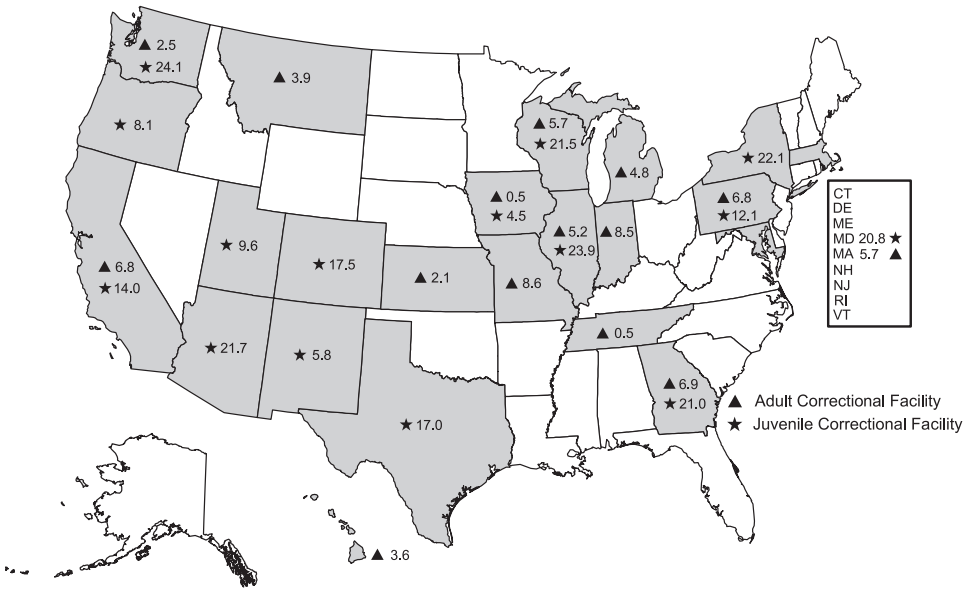
Figure FF. Syphilis serologic tests — Percent seroreactivity in men entering juvenile and adult corrections facilities, 2001



Note: The median positivity is presented from facilities reporting >100 test results. Mississippi and Texas submitted data from more than one adult corrections facility. California submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Local and State STD Control Programs; Centers for Disease Control and Prevention

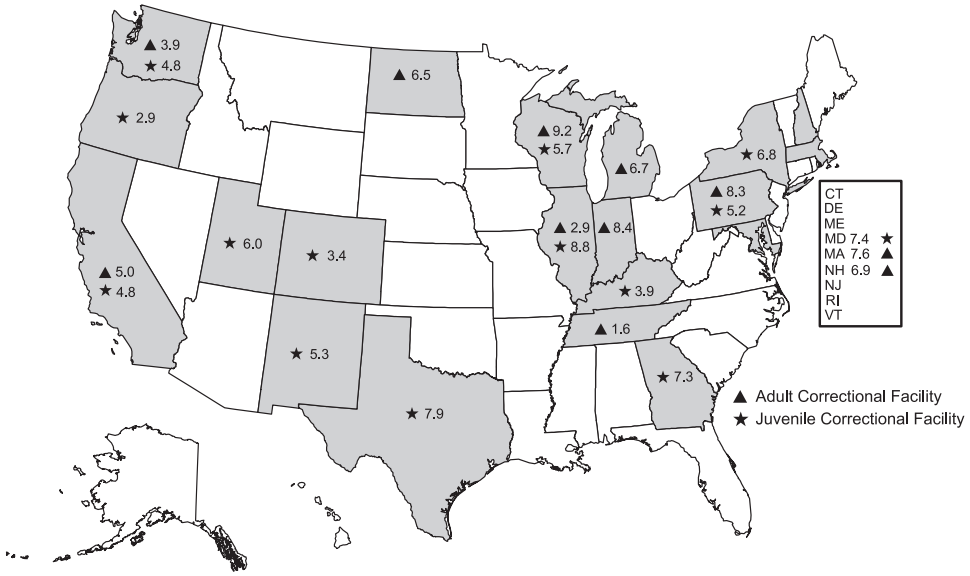
Figure GG. Chlamydia — Positivity in women entering juvenile and adult corrections facilities, 2001



Note: The median positivity is presented from facilities reporting >100 test results. Hawaii, Kansas, Pennsylvania, Massachusetts and Wisconsin submitted data from more than one adult corrections facility. California, Texas, Utah and Wisconsin submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Adolescent Women Reproductive Health Monitoring Project; Regional Infertility Prevention Program; Local and State STD Control Programs; Centers for Disease Control and Prevention

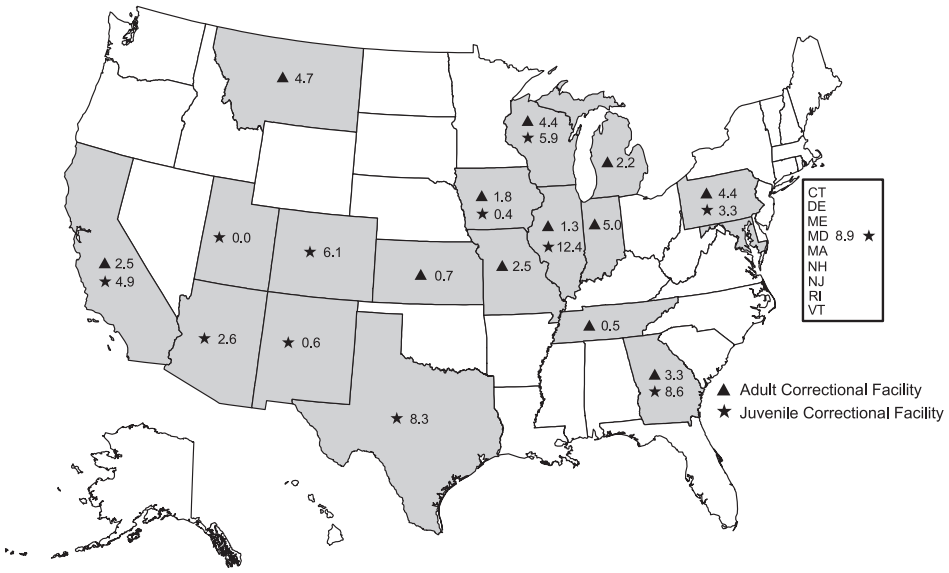
Figure HH. Chlamydia — Positivity in men entering juvenile and adult corrections facilities, 2001



Note: The median positivity is presented from facilities reporting >100 test results. Massachusetts, Tennessee and Wisconsin submitted data from more than one adult corrections facility. California, Illinois, Maryland, Oregon, Texas, Utah, Washington and Wisconsin submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Adolescent Women Reproductive Health Monitoring Project; Regional Infertility Prevention Program; Local and State STD Control Programs; Centers for Disease Control and Prevention

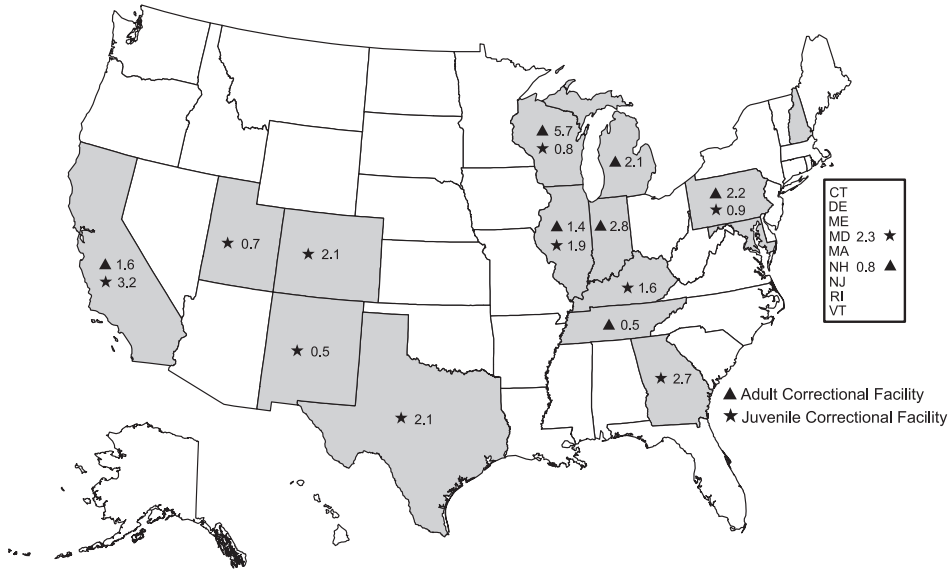
Figure II. Gonorrhea — Positivity in women entering juvenile and adult corrections facilities, 2001



Note: The median positivity is presented from facilities reporting >100 test results. Wisconsin submitted data from more than one adult corrections facility. California, Texas and Wisconsin submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Adolescent Women Reproductive Health Monitoring Project; Regional Infertility Prevention Program; Local and State STD Control Programs; Centers for Disease Control and Prevention

Figure JJ. Gonorrhea — Positivity in men entering juvenile and adult corrections facilities, 2001



Note: The median positivity is presented from facilities reporting >100 test results. Wisconsin submitted data from more than one adult corrections facility. California, Colorado, Illinois, Kentucky, Maryland and Wisconsin submitted data from more than one juvenile corrections facility.

SOURCE: Jail STD Prevalence Monitoring Project; Adolescent Women Reproductive Health Monitoring Project; Regional Infertility Prevention Program; Local and State STD Control Programs; Centers for Disease Control and Prevention